CERTIFICATE OF	TRANSMISSION BY FAC	SIMILE (37 CFR 1.8)	Docket No.	
Applicant(s): James R. I			08CL6005-4	
G . :- 1 N -				
Serial No.	Filing Date	Examiner	Group Art Unit	
10/064,868	August 26, 2002	Rajguru	1711	
Invention: POLYCARBONATES RESIN COMPOSITIONS AND ARTICLES THEREFROM				
I hereby certify that this is being facsimile transmon August 12.	nitted to the United States Patent	(Identify type of correspondence)	ogs.); Termianl Disclaimer (109.) : Transmitlal (109.) No. (703) 872-9310	
(Date)	, 1000			
		Tracy A. A	xiak	
		(Typed or Printed Name of Perso	~	
		Imm U	, Wax	
		(Signature,	, voca	
		//		
		V		
	Ness Fack			
	Note: Each paper must ha	ve its own certificate of mailing.		
			i	
			:	

CLAIMS AS AMENDED CLAIMS REMAINING AFTER AMENDMENT HIGHEST # PREV. PAID FOR PREV. PAID FOR CLAIMS PRESENT NUMBER EXTRA RATE RATE ADDITIONAL FEE TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 INDEP. CLAIMS 1 - 3 = 0 x \$84.00 \$0.00 Multiple Dependent Claims (check if applicable) □ \$0.00	AMENT Applicant(s): Ja			TAL LETTE	R (Large Er	itity)				ocket No. CL6005-4
TO THE COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED CLAIMS REMAINING HIGHEST # NUMBER EXTRA RATE FEE TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 INDEP. CLAIMS 1 - 3 = 0 x \$84.00 \$0.00 Multiple Dependent Claims (check if applicable)				•				· ·		
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED CLAIMS REMAINING AFTER AMENDMENT PREV. PAID FOR CLAIMS PRESENT RATE FEE TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 INDEP. CLAIMS 1 - 3 = 0 x \$84.00 \$0.00 Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT S0.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT TO breach in the amount of to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. Any additional filing fees required under 37 C.F.R. 1.16. Any additional filing fees required under 37 C.F.R. 1.16. Any additional filing fees required under 37 C.F.R. 1.16. Or-0862 Any patent application processing fees under 37 C.F.R. 1.16. Customer No. 23413 Phone No. (860) 286-2929 Dated: August 12, 2003 I contity that this document and fee is being deposit feet class mail under 37 C.F.R. 1.0 and is addressed to charges 12, 2003 I contity that this document and fee is being deposit feet class mail under 37 C.F.R. 1.0 and is addressed to Commissioner for Patients, P.O. Box 1450, Alexandria. 1 Customer No. (360) 286-2929	invention: POL	YCARB	ONATE RESIN	I COMPOSITION	S AND ART	ICLES THE	REI	FROM		
The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED CLAIMS REMAINING HIGHEST # NUMBER EXTRA RATE FEE TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 INDEP. CLAIMS 1 - 3 = 0 x \$84.00 \$0.00 Multiple Dependent Claims (check if applicable) □ \$0.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00 White the amount of to cover the filling fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. Any additional filling fees required under 37 C.F.R. 1.16. Any patent application processing fees under 37 C.F.R. 1.17. Pattuca A. Signature Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (868) 286-2929 Certify that this document and fee is being deposit first class mail under 37 C.F.R. 1.8 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria. No. 22313-1450.				THE COMMISS	ONER FOR	PATENTS:				
CLAIMS REMAINING AFTER AMENDMENT PREV. PAID FOR CLAIMS PRESENT TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 INDEP. CLAIMS 1 - 3 = 0 x \$84.00 \$0.00 Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT S0.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT No additional fee is required for amendment. Please charge Deposit Account No. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. Any additional filling fees required under 37 C.F.R. 1.16. Any patent application processing fees under 37 CFR 1.17. Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (868) 286-2929 Incertify that this document and fee is being deposit first class mail under 7 C.F.R. 1.0 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria. Commissioner for Patents, P.O. Box 1450, Alexandria.					• •	on.				
AFTER AMENDMENT PREV. PAID FOR CLAIMS PRESENT RATE FEE TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 Multiple Dependent Claims (check if applicable)				CLAIMS A	S AMENDE)			-	
AFTER AMENDMENT PREV. PAID FOR CLAIMS PRESENT FEE TOTAL CLAIMS 11 - 33 = 0 x \$18.00 \$0.00 Multiple Dependent Claims (check if applicable)		CLAIM	S REMAINING	HIGHEST #	NUMB	ER EXTRA				ADDITIONAL
INDEP. CLAIMS 1 - 3 = 0 x \$84.00 \$0.00 Multiple Dependent Claims (check if applicable) □ \$0.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00 **No additional fee is required for amendment.* □ Please charge Deposit Account No. in the amount of to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. ② Any additional filing fees required under 37 C.F.R. 1.16. ② Any patent application processing fees under 37 CFR 1.17. **Datuma J. Datume** Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (860) 286-2929 Continue of the continue of the amount of the amount of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-0862 Any additional filing fees required under 37 C.F.R. 1.16. Datum J. Datum J. C.F.R. 1.17. Customer No. 23413		AFTER	AMENDMENT	PREV. PAID FOR	CLAIMS	PRESENT		RATE		FEE
Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT So.00 No additional fee is required for amendment. Please charge Deposit Account No. in the amount of A check in the amount of to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. Any additional filing fees required under 37 C.F.R. 1.16. Any patent application processing fees under 37 CFR 1.17. Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (860) 286-2929 I certify that this document and fee is being deposit obagust 12, 2003 with the U.S. Postal Service first class mail under 37 C.F.R. 1.18 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria. 22313-1450.	TOTAL CLAIMS	1	1 -	33 =		0	x	\$18.0	0	\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00 No additional fee is required for amendment. □ Please charge Deposit Account No. in the amount of □ A check in the amount of to cover the filing fee is enclosed. ⊠ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. □ Any additional filing fees required under 37 C.F.R. 1.16. □ Any patent application processing fees under 37 CFR 1.17. Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (860) 286-2929 □ Certify that this document and fee is being deposit obagust 12, 2003 with the U.S. Postal Service files some fill under 37 C.F.R. 1,8 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, No. 22313-1450.	INDEP. CLAIMS	1		3 =		0	×	\$84.0	0	\$0.00
No additional fee is required for amendment. ☐ Please charge Deposit Account No. in the amount of ☐ A check in the amount of to cover the filing fee is enclosed. ☐ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. ☐ Any additional filing fees required under 37 C.F.R. 1.16. ☐ Any patent application processing fees under 37 CFR 1.17. ☐ Dated: August 12, 2003 ☐ Certify that this document and fee is being deposit longust 12, 2003 with the U.S. Postal Service of the U.S. Postal Service of Commissioner for Patents, P.O. Box 1450, Alexandria, V. 22313-1450.	Multiple Depende	nt Claim	s (check if appl	icable)						\$0.00
□ Please charge Deposit Account No. in the amount of □ A check in the amount of to cover the filing fee is enclosed. □ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. □ Any additional filing fees required under 37 C.F.R. 1.16. □ Any patent application processing fees under 37 CFR 1.17. □ Any patent application processing fees under 37 CFR 1.17. □ August 12, 2003 □ Signature □ Dated: August 12, 2003 □ Certify that this document and fee is being deposit obugust 12, 2003 with the U.S. Postal Service first class mail under 37 C.F.R. 1.8 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, 122313-1450.				TOTAL ADDITIO	NAL FEE FO	R THIS AME	ENE	DMENT		\$0.00
Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (860) 286-2929 Certify that this document and fee is being deposite obagust 12, 2003 with the U.S. Postal Service first class mail under 37 C.F.R. 1.8 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, V. 22313-1450.	Please ch A check in The Direct communic	narge De in the ametor is he cation or additiona	posit Account Nount of reby authorized credit any over al filing fees req	to cover the to charge payme payment to Depo uired under 37 C.	filing fee is ent of the following the following the following the following the fill of the following the fill of the following the fill of the fill	enclosed. owing fees a No. 07-0862		ciated wi	ith this	
\parallel \parallel \parallel \parallel	Patricia S. DeSim Registration No. 6 Customer No. 234	Sione 48,137 413	gnature	ne	Dated: ,	certify that obegust 12, 20 first class ma Commissione 22313-1450.	this	der 37 C.F Patents, F	with the F.R. 1.8 a P.O. Box	U.S. Postal Service as and is addressed to the x 1450, Alexandria, VA

Typed or Printed Name of Person Mailing Correspondence

08CL6005-4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	James R. Fishburn, et al.)	
Serial No.:	10/064,868)	Group Art Unit: 1711
Filed:	August 26, 2002)	
For:	POLYCARBONATE RESIN COMPOSITIONS AND ARTICLES THEREFROM)))	Examiner: Rajguru

AMENDMENT

VIA FACSIMILE: (703) 872-9310

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This amendment is submitted in response to the Office Action dated July 11,

2003. Please amend the Application as follows: